



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2011**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 26310		2. Exact name of the Corporation Dorcas Place Adult & Family Learning Center, Inc.			
3. State of Incorporation Rhode Island		4. Corporate Address in RI - Street Address 220 Elmwood Avenue		City Providence	Zip 02907
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief description of the character of business conducted in Rhode Island Provide educational opportunities through literacy, workplace training, college prep. programs & employment.					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Sean Welch			Vice-President Name Mary K. Morse		
Street Address c/o AMICA P.O. Box 6008			Street Address PO Box 368		
City Providence	State RI	Zip 02904	City Barrington	State RI	Zip 02806
Secretary Name Henry E. Cruz			Treasurer Name Susan M. Ragano		
Street Address c/o AMGEN 40 Technology Way			Street Address c/o KPMG< LLP 50 Kennedy Plaza		
City West Greenwich	State RI	Zip 02817	City Providence	State RI	Zip 02903
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date _____
 Check No _____
 By: _____
FOR SECRETARY OF STATE USE ONLY

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Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Sean F. Welch 03/16/2012
 Signature of Officer Date

Sean F. Welch

Print or Type Name of Officer

Board President / Chair

Title of Officer

**Dorcas Place
Board of Directors
2011**

Michele Adamo (2011)
12 Williams Street
Barrington, RI 02806
(H) (401)450-9670
Madamo914@gmail.com

Henry E. Cruz, Secretary (2010)
Amgen
40 Technology Way
West Greenwich, RI 02817
401-392-4706
(C) 401-641-0714
(C) 401-829-1498
hacruz@amgen.com or hacruz27@gmail.com

Sarah Denby (2009)
106 Nayatt Road
Barrington, RI 02806
(H) 401-247-2413
sarahdenby@gmail.com

Stephanie Federico (2011)
24 Messer Street, Apt. 3
Providence, RI 02903
(401)215-4760
Sfederil@yahoo.com

Fernando Fialho (2011)
Amgen
40 Technology Way
West Greenwich, RI 02817
(O) 401-392-1200
(O) 401-392-8121
ffialho@amgen.com

Patricia Goldstein, Member-at-Large (2009)
RI Airport Corporation
2000 Post Road
Warwick, RI 02886
(O) 401-691-2272
PGoldstein@pvdairport.com

Gertrude F. Jones (2011)
Lifespan
167 Point Street, Suite 1C, Coro Bldg.
Providence, RI 02903
(O) 401-444-5341
(C) 401-639-6155
gjones@lifespan.org

W. Robert Kemp, Member-at-Large (2010)
16 Lantern Lane
Barrington, RI 02806
(H) 401-247-2773
(AA) 401-628-6715
(O) 401-457-2431
(O) 978-657-3500
(O) 978-657-2119
wrkemp@cox.net

Mary K. Morse, Vice Chair (2010)
MK Morse Search, LLC
PO Box 368
Barrington, RI 02806-0368
(O) 401-247-2654
(C) 401-447-2950
morse@mkmorsesearch.com

Susan M. Ragano, Treasurer (2010)
KPMG, LLP
50 Kennedy Plaza
Providence, RI 02903
(O) 401-528-2616
(C) 401-261-6026
sragano@kpmg.com

Robin Ann Smith (2011)
2 Clydes Way
Westport, MA 02790
(H) 508-636-7743
(W) 401-825-2096
rsmith@bristol.mass.edu

Jose Valerio (2006)
35 Stadden Avenue
Providence, RI 02907
(H) 401-785-3182
(C) 401-787-1869
Jose.Valerio@ppsd.org

Sean F. Welch, Chair (2008)
Amica
P.O. Box 6008
Providence, RI 02904
(O) 1-800-652-6422 Ext. 23385
(O) 401-578-8234
swelch@amica.com

Jim Yancy (2001)
Met Life
700 Quaker Lane
Warwick, RI 02886
(O) 401-827-6264
(H) 401-884-7849
jyancy@metlife.com

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